

**(Please Print)**

**BE SURE TO GIVE ACCURATE AND COMPLETE INFORMATION. FAILURE TO DO SO MAY RESULT IN THE REJECTION OF YOUR APPLICATION. IT IS IMPORTANT THAT YOU FILL OUT ALL SECTIONS OF THIS APPLICATION COMPLETELY AND TO THE BEST OF YOUR ABILITY. YOUR APPLICATION WILL BE USED AS A PART OF THE EVALUATION PROCESS AND, THEREFORE, SHOULD REPRESENT YOUR BEST EFFORT. YOU MAY ATTACH A RESUME, BUT THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.**

## Current Information

Position applied for \_\_\_\_\_ Date \_\_\_\_\_

When will you be available for employment? \_\_\_\_\_

Are you seeking:      Full-time      ☐      Part-time      ☐      Summer Work      ☐

| NAME | Last | First | Middle |
|------|------|-------|--------|
|------|------|-------|--------|

|         |                          |      |       |     |
|---------|--------------------------|------|-------|-----|
| ADDRESS |                          |      |       |     |
|         | Street & No. or P.O. Box | City | State | Zip |

**TELEPHONE**    (     )                  (     )                  \_\_\_\_\_  
                    Home                          Business                          E-mail Address

DRIVER LICENSE NO. \_\_\_\_\_ STATE \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_

## General Information

a. Have you ever been employed with the City of Asheville? Yes ☐ No ☐  
If yes, what dept. & when? \_\_\_\_\_

b. Are you related by blood or marriage to any City employee? Yes ☐ No ☐  
If yes, give name, relationship, and department \_\_\_\_\_

c. Have you ever been convicted of a misdemeanor or felony? Yes ☐ No ☐  
If yes, please explain \_\_\_\_\_

**NOTE:** A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, how recent the offense was, and nature of the crime will be taken into consideration.

d. Are you willing to work overtime? Yes ☐ No ☐ Weekends Yes ☐ No ☐  
Nights Yes ☐ No ☐ Holidays Yes ☐ No ☐

## Employment

**Record your complete work history in the spaces below. Begin with your current or most recent employer first. Attach as many sheets as is necessary to account for your full record. Be sure to account for gaps in your employment history. Related volunteer experience should also be listed.**

### A. CURRENT OR MOST RECENT EMPLOYMENT

Job title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Last Salary \_\_\_\_\_

Name and title of supervisor \_\_\_\_\_ No. of employees you supervise \_\_\_\_\_

Employer or company \_\_\_\_\_

Address \_\_\_\_\_

Date Employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date Separated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Main Duties \_\_\_\_\_

Full-time Years \_\_\_\_\_ Months \_\_\_\_\_ Part-time Years \_\_\_\_\_ Months \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If part-time, number of hours worked per week \_\_\_\_\_

If currently employed, may we inquire of this employer about your qualifications and character? Yes ☐ No ☐

### B. NEXT MOST RECENT EMPLOYMENT

Job title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Last Salary \_\_\_\_\_

Name and title of supervisor \_\_\_\_\_ No. of employees you supervise \_\_\_\_\_

Employer or company \_\_\_\_\_

Address \_\_\_\_\_

Date Employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date Separated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Main Duties \_\_\_\_\_

Full-time Years \_\_\_\_\_ Months \_\_\_\_\_ Part-time Years \_\_\_\_\_ Months \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If part-time, number of hours worked per week \_\_\_\_\_

### C. NEXT RECENT EMPLOYMENT

Job title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Last Salary \_\_\_\_\_

Name and title of supervisor \_\_\_\_\_ No. of employees you supervise \_\_\_\_\_

Employer or company \_\_\_\_\_

Address \_\_\_\_\_

Date Employed \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date Separated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Main Duties \_\_\_\_\_

Full-time Years \_\_\_\_\_ Months \_\_\_\_\_ Part-time Years \_\_\_\_\_ Months \_\_\_\_\_

Reason for leaving \_\_\_\_\_

If part-time, number of hours worked per week \_\_\_\_\_

**Education** \_\_\_\_\_

**(GIVE COMPLETE EDUCATIONAL HISTORY BELOW)**

High School: Name \_\_\_\_\_ Location \_\_\_\_\_

Circle highest school year completed:    1    2    3    4    5    6    7    8    9    10    11    12

\_\_\_\_\_

If you did not graduate, do you have a High School Equivalency (GED) ?    Yes ☐    No ☐

| Education beyond High School | Name and Location       | Circle No. Years Completed | Degree Certificate | Major Subject |
|------------------------------|-------------------------|----------------------------|--------------------|---------------|
| College or University        | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |
| Graduate or Professional     | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |
| Other Education              | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |

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| Other Education              | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |

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High School: Name \_\_\_\_\_ Location \_\_\_\_\_

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| Graduate or Professional     | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |
| Other Education              | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |

**Education** \_\_\_\_\_

**(GIVE COMPLETE EDUCATIONAL HISTORY BELOW)**

High School: Name \_\_\_\_\_ Location \_\_\_\_\_

Circle highest school year completed:    1    2    3    4    5    6    7    8    9    10    11    12

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| College or University        | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |
| Graduate or Professional     | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |
| Other Education              | _____<br>_____<br>_____ | 1   2   3   4              |                    |               |

[illegible]

## References

List three (3) persons living in the United States who are **not related to you and who have a definite knowledge** of your ability to perform the job for which you are applying. **DO NOT REPEAT NAMES OF SUPERVISORS.**

(1) Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone (      ) \_\_\_\_\_

(2) Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone (      ) \_\_\_\_\_

(3) Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone (      ) \_\_\_\_\_

### **-Pre-Employment Authorization (Read Carefully)**

I certify to the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the application information I may be disqualified for employment consideration or dismissed from employment with the City of Asheville.

I authorize my former employer to give any information regarding my employment. I have authorized them to release my records and discuss my work performance with representatives of the City of Asheville who are investigating the response provided herein.

I understand that proof of my eligibility for employment in the United States must be furnished before I begin work with the City of Asheville.

I understand that North Carolina state law requires male applicants for employment, 18 to 26, to register for military service. By signing below I certify that I am in compliance with state law.

I understand that my social security number will be kept confident and used only in accordance with federal, state and local laws.

I understand that a pre-employment drug screening is required.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR DEPARTMENTAL USE ONLY**

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## APPLICANT INFORMATION FORM

The City of Asheville is an Equal Opportunity Affirmative Action Employer. We need this information to comply with reporting requirements of the Equal Employment Opportunity Commission. **This form will be separated from your employment application and will not be used in any way in our selection process or for any personnel action following employment.**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
First Middle Last

SEX: ☐ Male ☐ Female YOUR AGE CATEGORY: ☐ 14 or older ☐ 18 or older  
☐ 40 or older ☐ 65 or older

### ETHNIC CATEGORY

☐ White (Not Hispanic) Origins in Europe, North Africa, the Middle East, or the Indian Subcontinent.

☐ Black (Not Hispanic) Origins in any of the Black or African-American racial groups.

☐ Hispanic Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Cultures or groups, regardless of race.

☐ Asian or Pacific Islanders Origins in the Far East, Southeast Asia, or the Pacific Islands.

☐ American Indian or Alaskan Native Origins in the original peoples of North America.

*We need the following information to help us evaluate the effectiveness of our recruitment program.*

### HOW DID YOU LEARN OF THIS OPENING (Please check all which apply)

Newspaper (which one?) \_\_\_\_\_

Professional Magazine or Newsletter (which one?) \_\_\_\_\_

Employment Security Commission (which city) \_\_\_\_\_

Radio (which station) \_\_\_\_\_

TV (which station?) \_\_\_\_\_

Internet (Which site) \_\_\_\_\_

Career/Job Fair(specify) \_\_\_\_\_

Other \_\_\_\_\_

## PRE-EMPLOYMENT AUTHORIZATION FORM

I authorize the City of Asheville to perform a Police and Records Check of my background and a Credit Check, if necessary.

\_\_\_\_\_  
**Name (please print)**

\_\_\_\_\_  
**Social Security Number**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Signature**